

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishm		1	M	Telephone Number	spection)	PERMIT#		
Establishm	ing F.,	ee (ni	I'ls † imber and street, city, state, zip code)	1112 131 2010	9/22	12019	19-178	
			RI Now Albert, IN 47150		7		• • • • • •	
Owner	Collection to	, <u>~~</u>	Ke New Allend In 191-0	Purpose:	Follow-u	n Releas	se Date	
3.6 + Owner's A	Tom	1	WHA	Routine	No 10 days			
Owner's A	ddress	•		2. Follow-up	Summary of Violations:			
				3. Complaint	1 2	4		
Person in C	Charge	<i>l</i> .	1 Christy Hamm	4. Pre-Operational	NC_4	₽ R 🚫		
Responsibl	e Person's	E-m	il Joseph James	5. Temporary	Menu Type (See back of page)			
				6. HACCP				
Certified F	_			7. Other (list)	1 <u>X</u> 2	3	_45	
√/A -	Mur .	170	<u>. </u>			<u> </u>		
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"								
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"								
Section#	C/NC	R	Narrative			To Be Co	orrected By	
200	ΝC		describe missing from day	cock (/ wee	k	
291	, J E		deaned charine first strips, but qual		uvemsh	1 wee	k :	
247	Nic		Observed in chite to be miley	*		T.dan	•	
416	NE		Observed dend buys in light shirts	and an BOH F	1	1	le	
424	نايير		Observed BOH strang areas to be a			1 44	k	
			unecessary items / margained					
								
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			<u>· </u>	- 4. +				
Received by (name and title printed): Inspected by (name and title printed):							77.11	
Received by (signature): Inspected by (signature):								
Received by (signature): Christi Hammer Inspected by (signature):								
cc: cc: de:								